



Xerox Docket No. D/A4004

PATENT APPLICATION

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re the Application of

Guerino G. SACRIPANTE et al.

Application No.: 10/765,327

Filed: January 28, 2004

Docket No.: 118410

For: EMULSION AGGREGATION PROCESS FOR FORMING POWDER COATING
COMPOSITIONS, POWDER COATING COMPOSITIONS AND METHOD FOR
USING THE SAME

PRELIMINARY AMENDMENT

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Please consider the following:

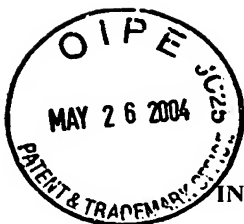
Amendments to the Specification;

Amendments to the Claims as reflected in the listing of claims;

Remarks.

05/27/2004 EAREGAY1 00000076 240037 10765327

01 FC:1201	172.00 DA
02 FC:1202	360.00 DA
03 FC:1051	130.00 DA



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PATENT APPLICATION

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

OLIFF & BERRIDGE, PLC
P.O. Box 19928
Alexandria, Virginia 22320
Telephone: (703) 836-6400
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ATTORNEY DOCKET NO.: 118410

DATE: May 26, 2004

AMENDMENT TRANSMITTAL

In re the Application of:

Guerino G. SACRIPANTE et al.

Application No.: 10/765,327

Group Art Unit: unknown

Filed: January 28, 2004

Examiner: unknown

For: EMULSION AGGREGATION PROCESS FOR FORMING POWDER COATING COMPOSITIONS, POWDER
COATING COMPOSITIONS AND METHODS FOR USING THE SAME

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an Amendment in the above-identified application.

The filing fee has been calculated as shown below:

	(Column 1)	(Column 2)	(Column 3)
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NO. PREVIOUSLY PAID FOR	PRESENT EXTRA
TOTAL CLAIMS	*40 MINUS	**20	= 20
INDEP CLAIMS	*5 MINUS	***3	= 2
<input type="checkbox"/> FIRST PRESENTATION OF MULTIPLE DEP. CLAIM			

	RATE	ADD'L FEE
x 18	\$	360.00
x 86	\$	172.00
+ 290	\$	
	\$	532.00

* If the entry in Column 1 is less than the entry in Column 2, write "0" in Column 3.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space.

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found from the equivalent box in
Column 1 of a prior Amendment or the number of claims originally filed.

- ☒ Please charge my Deposit Account No. 24-0037 in the amount of \$532.00. Two duplicate copies of this sheet are attached.
- ☒ The Commissioner is hereby authorized to charge payment of any filing fees under 37 C.F.R. §1.16 for presentation of extra claims or credit any overpayment to Deposit Account No. 24-0037. Two duplicate copies of this sheet are attached.

DEPOSIT ACCOUNT USE
AUTHORIZATION
Please grant any extension
necessary for entry;
Charge any fee due to our
Deposit Account No. 24-0037

Respectfully submitted,

James A. Oliff
Registration No. 27,075

Julie M. Seaman
Registration No. 51,156

JAO:JMS/

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